

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000040718

Entity Name: MAD TRADZ, LLC

FILED
Aug 29, 2008
Secretary of State

Current Principal Place of Business:

1197 CREEKSIDE DRIVE
WELLINGTON, FL 33414

New Principal Place of Business:

Current Mailing Address:

1197 CREEKSIDE DRIVE
WELLINGTON, FL 33414

New Mailing Address:

FEI Number: 06-1812033 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

NELMS, JAMES
1197 CREEKSIDE DRIVE
WELLINGTON, FL 33414 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: NELMS, JAMES
Address: 1197 CREEKSDE DRIVE
City-St-Zip: WELLINGTON, FL 33414

Title: MGRM () Delete
Name: NELMS, ROBIN
Address: 1197 CREEKSIDE DRIVE
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JAMES NELMS

MGRM

08/29/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date